



# **FILER MUTUAL**

Telephone Company

Received &amp; Inspected

JUN 25 2014

FCC Mail Room

**REDACTED- FOR PUBLIC INSPECTION**

June 15, 2014

**VIA OVERNIGHT DELIVERY**

Marlene H. Dortch, Secretary  
 Federal Communications Commission  
 Office of the Secretary  
 445 12<sup>th</sup> Street, S.W.  
 Washington, DC 20554

RE: **Confidential Financial Information Subject to Protective Order in WC Docket Nos. 10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, GN Docket No. 09-51, WT Docket No. 10-208, Before the Federal Communications Commission**

Dear Ms. Dortch:

Filer Mutual Telephone Company ("Filer Mutual"), Study Area 472220, a privately-held rate of return carrier receiving high cost support, has electronically submitted FCC Form 481 to the Commission with redacted financial data, in compliance with 47 C.F.R. §§ 54.313 and 54.422.

As specified in the Protective Order issued on November 16, 2012 by the Commission, two copies of the redacted confidential information are being filed simultaneously with the non-redacted confidential information. The redacted information for this filing and each page of the file where confidential information has been omitted is marked "REDACTED - FOR PUBLIC INSPECTION"

Please feel free to contact me with any questions regarding this particular matter.

Sincerely,

Steve Cowger, General Manager/COO  
 For Filer Mutual Telephone Company

Enclosures

.cc Mr. Charles Tyler, FCC Telecommunications Access Policy Division  
 Ms. Grace Seaman, Idaho Public Utilities Commission

No. of Copies rec'd  
 ABCDE

0+1

**FCC Form 481 - Carrier Annual Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010> Study Area Code	472220	<b>Received &amp; Inspected</b>
<015> Study Area Name	FILER MUTUAL TEL -ID	
<020> Program Year	2015	
<030> Contact Name: Person USAC should contact with questions about this data	Robert Kraut	<b>JUN 25 2014</b>
<035> Contact Telephone Number: Number of the person identified in data line <030>	2083264331 ext..	<b>FCC Mail Room</b>
<039> Contact Email Address: Email of the person identified in data line <030>	bkraut@filertel.net	

**ANNUAL REPORTING FOR ALL CARRIERS**
**54.313**  
Completion  
Required

**54.422**  
Completion  
Required

(check box when complete)

<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200> Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> -- check box if no outages to report		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300> Unfulfilled Service Requests (voice)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310> Detail on Attempts (voice)	<div></div> (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330> Detail on Attempts (broadband)	<div></div> (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed	0.6544	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430> Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440> Fixed	0.6544	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> <div>472220ID510.pdf</div> (attached descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> <div>472220ID610.pdf</div> (attached descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710> Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/>	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1000> Voice Services Rate Comparability	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010> <div>472220ID1010.pdf</div> (attach descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100> Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/>	(if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet**

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<2005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet**

<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**(100) Service Quality Improvement Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	472220
<015>	Study Area Name	FILER MUTUAL TEL - ID
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035>	Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bkraut@filertel.net
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) <input type="radio"/> <input checked="" type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no ) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

4722201D112.pdf

- <112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

Name of Attached Document

Please check these boxes below to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How (USF) was used to improve service quality
- <116> How (USF) was used to improve service coverage
- <117> How (USF) was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.




(200) Service Outage Reporting (Voice)  
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	472220
<015>	Study Area Name	FILER MUTUAL TEL -ID
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035>	Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bkraut@fildertel.net

[illegible]

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

[illegible]

(710) Broadband Price Offerings  
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code	472220
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<015>	Study Area Name	FILER MUTUAL TEL - 1D
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<020>	Program Year	2015
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<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
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<035> Contact Telephone Number - Number of person identified in data line <030> 2083264331 ext.

<039>	Contact Email Address - Email Address of person identified in data line <030>	bkrautofilertel.net
-------	---	---------------------

<11>	<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
------	------	------	------	------	-----	------	------	------	------

[illegible]

(800) Operating Companies  
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code 472220

<015>	Study Area Name	FILER MUTUAL TEL - ID
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<020>	Program Year	2015
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<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
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<035> Contact Telephone Number - Number of person identified in data line <030> 2083264331 ext.

<039> Contact Email Address - Email Address of person identified in data line <030> bkraut@filertel.net

<810> Reporting Carrier Filer Mutual Telephone Company

<811> Holding Company

<812> Operating Company

<813>

<a1>

<a2>

<a3>

## Affiliates

**SAC**

### Doing Business As Company or Brand Designation



**(900) Tribal Lands Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	472220
<015>	Study Area Name	FILER MUTUAL TEL -1D
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035>	Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bkraut@fildertel.net

&lt;910&gt; Tribal Land(s) on which ETC Serves

&lt;920&gt; Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes, No, NA)



**(1100) No Terrestrial Backhaul Reporting  
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	472220
<015>	Study Area Name	FILER MUTUAL TEL - ID
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035>	Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bkraut@filertel.net

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)

☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)

☐

**(1200) Terms and Condition for Lifeline Customers**

FCC Form 481

Lifeline

OMB Control No. 3060-0986/OMB Control No. 3060-0819

Data Collection Form

July 2013

<010>	Study Area Code	472220
<015>	Study Area Name	FILER MUTUAL TEL -ID
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035>	Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bkrautwfilertel.net

&lt;1210&gt; Terms &amp; Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

&lt;1220&gt; Link to Public Website

HTTP [www.filertel.com](http://www.filertel.com)

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

**(2000) Price Cap Carrier Additional Documentation****Data Collection Form***Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	472220
<015>	Study Area Name	FILER MUTUAL TEL -1D
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035>	Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkraut@fildtel.net

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

**Incremental Connect America Phase I reporting**

<2010> 2nd Year Certification (47 CFR § 54.313(b)(1))  
 <2011> 3rd Year Certification (47 CFR § 54.313(b)(2))

☐  
☐
**Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))**

<2012> 2013 Frozen Support Certification  
 <2013> 2014 Frozen Support Certification  
 <2014> 2015 Frozen Support Certification  
 <2015> 2016 and future Frozen Support Certification

☐  
☐  
☐  
☐
**Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))**

<2016> Certification Support Used to Build Broadband

☐
**Connect America Phase II Reporting (47 CFR § 54.313(e))**

<2017> 3rd year Broadband Service Certification  
 <2018> 5th year Broadband Service Certification  
 <2019> Interim Progress Certification  
 <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

☐  
☐  
☐  
☐

<2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information



## (3000) Rate Of Return Carrier Additional Documentation

FCC Form 481

## Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code	472220
<015> Study Area Name	FILEK MUTUAL TEL. CO
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Hubert Kraut
<035> Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	hkraut@flettel.net

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

- (3010) Progress Report on 5 Year Plan  
Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

- (3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

- (3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

- (3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))  
(3014) If yes, does your company file the RUS annual report

(Yes/No) ☒ ☒  
(Yes/No) ☒ ☒

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

- (3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) ☐  
(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

- (3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

- (3018) If the response is no on line 3014, is your company audited?

(Yes/No) ☒ ☐

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

- (3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications ☒

- (3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☒

- (3021) Management letter issued by the independent certified public accountant that performed the company's financial audit. ☒

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

- (3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, ☐

- (3023) Underlying information subjected to a review by an independent certified public accountant ☐

- (3024) Underlying information subjected to an officer certification. ☐

- (3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

472220103026.pdf

- (3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

Certification - Reporting Carrier Data Collection Form	PEC Form 481 CMR Control No. 3000-0015/CMR Control No. 3000-0015 Rev 01/13
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<010> Study Area Code	472220
<015> Study Area Name	FILER MUTUAL TEL - ID
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035> Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	bkraut@filertel.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LJ Recipients</b>	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: FILER MUTUAL TEL - ID	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/19/2014
Printed name of Authorized Officer: Steve Cowger	
Title or position of Authorized Officer: General Manager/COO	
Telephone number of Authorized Officer: 2083264331 ext.	
Study Area Code of Reporting Carrier: 472220	Filing Due Date for this form: 06/30/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	472220
<015> Study Area Name	FILER MUTUAL TEL -ID
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035> Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	bkraut@filertel.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	



## Attachments

Response Line 100

Filer Mutual Telephone Company

Study Area 472220

**Initial Five-Year Service Quality Improvement Plan – 47 C.F.R. §54.202(a)**

Filer Mutual Telephone Company submits initial five-year build-out Service Quality Improvement plan pursuant to C.F.R. §54.202(a)(1)(ii) that specifies specificity proposed improvements or upgrades to Filer Mutual Telephone Company's network throughout its service area. In addition, Filer Mutual Telephone Company is providing information that includes an estimate of the population that will be serviced as a result of these improvements.

The receipt of USF support, combined with other funding sources will allow Filer Mutual Telephone Company to continue to meet its broadband obligations within its service area, complete service request within a reasonable amount of time, provide reliable, state-of-the-art, high-quality voice and broadband service, to its [Redacted] rural customers in 2 exchanges. The projects listed within this plan will be used to improve or

**Voice Network Upgrades : 2015**

Project Description	Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**REDACTED-FOR PUBLIC INSPECTION**

Response Line 100

Filer Mutual Telephone Company

**Voice Network Upgrades : 2016**

Project Description		Area	Estimated Start	Estimated	Estimated
		Served/Wire center	Date	Completion Date	Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**Voice Network Upgrades : 2017**

Project Description		Area	Estimated Start	Estimated	Estimated
		Served/Wire center	Date	Completion Date	Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**Voice Network Upgrades : 2018**

Project Description		Area	Estimated Start	Estimated	Estimated
		Served/Wire center	Date	Completion Date	Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**REDACTED-FOR PUBLIC INSPECTION**



Response Line 100  
Filer Mutual Telephone Company  
Study Area 472220

**Voice Network Upgrades : 2019**

Project Description		Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**Broadband Upgrades : 2015**

Project Description		Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**REDACTED-FOR PUBLIC INSPECTION**

Response Line 100  
Filer Mutual Telephone Company  
Study Area 472220

**Broadband Upgrades : 2016**

Project Description		Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**Broadband Upgrades : 2017**

Project Description		Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**REDACTED-FOR PUBLIC INSPECTION**

Response Line 100  
Filer Mutual Telephone Company  
Study Area 472220

**Broadband Upgrades : 2018**

Project Description		Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**Broadband Upgrades : 2019**

Project Description		Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

**REDACTED-FOR PUBLIC INSPECTION**



The Company project that the capital expenditures, by Part 32 accounts for 2014 through 2019 related the above identified projects will be:

	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
<b>2110 Land &amp; General Support</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>2210 Central Office Switching</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>2230 Central Office Transmission</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>2410 Cable &amp; Wire Facilities</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>Total Capital Expenditures</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

The Company project that the Opex expenditures, by Part 32 accounts for 2014 through 2019 related the above identified projects will be:

	FY 2014	FY 2015	FY 2016	FY 2017	FY2018	FY 2019
<b>Plant Specific</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>Plant Nonspecific</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>Depreciation</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>Customer Operations</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>Corporate Operations</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
<b>Total Operating Expenses</b>	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]

Filer Mutual Telephone Company, Inc. received USF Funds in 2013 in the amount of:

High Cost Loop Support	[Redacted]
ICLS Support	[Redacted]
CAF Inter-carrier Comp	[Redacted]
<b>Total</b>	[Redacted]

**REDACTED-FOR PUBLIC INSPECTION**



## **FILER MUTUAL**

Telephone Company

**To:** Federal Communications Commission

**From:** Filer Mutual Telephone Company, SAC 472220

**Date:** 6/2/2014

**Re:** Form 481, Line 510, Descriptive Document for Service Quality Standards & Consumer Protection Rules Compliance

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Pursuant to 47 C.F.R. § 54.313(a)(5) and or 47 C.F.R. § 54.422(b)(3) Filer Mutual Telephone Company (Filer Mutual) is in compliance with appropriate FCC Service Quality Standards and Consumer Protection Rules. Filer Mutual provides CPNI training to all of its new employees and in addition trains all of its existing employees. Filer Mutual also conducts subscriber outreach regarding CPNI and mails CPNI explanation messages when there is a change to a customer's CPNI. In addition Filer Mutual trains staff on Red Flag issues. All company employees are required to acknowledge that they have completed CPNI and Red Flag training and understand obligations to adherence of applicable rules.

Filer Mutual Telephone Company understands and complies with the Idaho Public Utilities Commission's *Telephone Customer Relations Rules*, IDAPA 31.41.01, adopted under the general legal authority of the Public Utilities Law, Chapters 1 through 7, Title 61, Idaho Code, and the Telecommunications Act of 1988, Chapter 6, Title 62, Idaho Code, with regards to service. These telephone customer relations rules provide a set of fair, just, reasonable, and non-discriminatory rules regarding deposits, guarantees, billing, application for service, denial of service, termination of service, complaints to telephone companies, billing for interrupted service, and provisions of certain information about customer to authorities.

Respectfully Submitted,

Filer Mutual Telephone Company  
Steve Cowger  
General Manager/COO



**FILER MUTUAL**

Telephone Company

**To:** Federal Communications Commission

**From:** Filer Mutual Telephone Company, SAC 472220

**Date:** 6/2/2014

**Re:** Form 481, Line 610, Descriptive Document for Functionality in Emergency Situations Compliance

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Pursuant to 47 C.F.R. § 54.313(a)(6) and 47 C.F.R § 54.422(b)(4) as set forth in 47 C.F.R § 54.202(a)(2) Filer Mutual Telephone Company meets the requirements to remain functional in emergency situations and has the following capabilities: Back-up power is provided to Filer Mutual Telephone Company's central and remote offices by use of fixed generators and/or batteries that provide it with a minimum of 12 hours of emergency power service. In addition, Filer Mutual Telephone Company's field electronics have a minimum of 12 hours of back-up power by use of fixed generators and/or batteries. Filer Mutual Telephone Company also has SONET technology in its network that allows for self-healing network should a fiber cut occur in its core network and will automatically reroute traffic. Filer Mutual Telephone Company also has redundant paths within its network to provide for the capability to reroute traffic. Filer Mutual Telephone Company is capable of managing traffic spikes resulting from emergency situations.

Respectfully Submitted,

Filer Mutual Telephone Company  
Steve Cowger  
General Manager/COO



(700) Price Offerings including Voice Rate Data  
Data Collection Form

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010>	Study Area Code	472220
<015>	Study Area Name	FILER MUTUAL TEL -ID
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035>	Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bkraut@fildextel.net

1/1/2014

[illegible]



(710) Broadband Price Offerings Data Collection Form FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	472220
<015>	Study Area Name	FILER MUTUAL TEL -ID
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert Kraut
<035>	Contact Telephone Number - Number of person identified in data line <030>	2083264331 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bkraut@filertel.net

<711>	<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
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[illegible]